

Attorney(s)

Index #

1:20-cv-0840(BKS/CFH)

Purchased/Filed: July 27, 2020

STATE OF New York

Court: U. S. District

County/District: Northern Dist.

AFFIDAVIT OF SERVICE

Jane Doe on behalf of herself and her minor child, et al

Plaintiff(s)/Petitioner(s)

vs

Howard Zucker, in his official capacity as Commissioner of Health for the State of New York, et al

Defendant(s)/Respondent(s)

STATE OF NEW YORK COUNTY OF ALBANY

Christopher Warner, being duly sworn deposes and says deponent is not a party herein, is over the age of eighteen years and resides in the State of New York. That on August 4, 2020 at 1:03 pm at Justice Bldg., Empire State Plaza, Albany, NY 12237 deponent did serve the following :
(Address where service was accomplished.)

Summons in a Civil Action, Notice of Electronic Filing, Class Action Complaint

on: NYS Department of Health c/o Attorney General

Defendant (herein called recipient) therein named, SS.:

#1 INDIVIDUAL ☐ By delivering a true copy of each to said recipient personally; deponent knew the person served to be the person described as said person therein.

#2 CORP. ☒ A corporation, by delivering thereat a true copy of each to William Sportman personally, deponent knew said corporation so served to be the corporation, described in same as said recipient and knew said individual to be Authorized Agent thereof.

Service was made in the following manner after your deponent was unable, with due diligence, to serve the defendant in person, including an effort to reach the defendant by telephone, (if such telephone number was available) and an attempt to locate the defendant's place of employment.

#3 SUITABLE AGE PERSON ☐ By delivering a true copy of each to _____ a person of suitable age and discretion who agreed to accept on behalf of the party.. Said premises is recipient's: ☐ dwelling house (usual place of abode). ☐ actual place of business

#4 AFFIXING TO DOOR ☐ By affixing a true copy of each to the door of said premises, which is recipient's ☐ actual place of business ☐ dwelling house (usual place of abode) within the state.

#5 MAILING COPY ☐ On _____ deponent completed service under the last two sections by depositing a copy of the above listed documents to the above address in a First Class postpaid properly addressed plain envelope marked "Personal and Confidential" in an official depository under the exclusive care and custody of the United States Post Office in the State of New York.

The outside of the envelope did not include a return address or indicate that the communication was from an attorney. Deponent called at the aforementioned address on the following dates and times:

on the _____ day of _____ at _____
on the _____ day of _____ at _____
on the _____ day of _____ at _____
on the _____ day of _____ at _____
on the _____ day of _____ at _____

#6 DESCRIPTION A description of the person served is as follows:

☒ Sex Male Color of skin White Hair Brown Approx. Age 36 - 50 Yrs. Approx. Height 5' 9" - 6' 0"
(use with #1, 2 or 3) Approx. weight 161 - 200 Lbs Other _____

#7 WIT. FEES ☐ \$ _____ the authorizing traveling expenses and one day's witness fee was paid (tendered) to the recipient.

#8 NON MIL ☒ To the best of my knowledge and belief, said person was not presently in military service of the United States Government or on active duty in the military service in the State of New York at the time of service.

Sworn to before me on this

5th day of August 2020

Yvonne Strain
Notary Public
YVONNE STRAIN
NOTARY PUBLIC, State of New York
01ST5314054, Schenectady
Commission Expires November 3, 2022

Christopher Warner
Christopher Warner

Invoice Work Order # 2021409
Attorney File # RE: Doe v. Zucker